

EEO FIELD OFFICE  
LAKELAND DISTRICT



August 11, 2021

Henrietta Arnold-Simpson  
3427 W. Villard Ave  
Milwaukee, WI 53209

**Subject: Notice of Right to File Individual Complaint**  
**EEO Case No.: 4J-530-0115-21**

This letter is to notify you that I have concluded the processing of your claim of discrimination initiated on May 13, 2021.

In this matter, you claim discrimination based on age national origin, sex (female), religion (unknown) equal pay act (female) and disability (physical) when on May 8, 2021 you were verbally harassed and followed around by management.

An inquiry was conducted, and Michael Czerwinski stated that he warned you about being placed on EP due to your conduct and raising your voice on the work floor. He also stated that your claims of reasonable accommodation being denied are false and that he is unaware of any assigned duties that violate your restrictions.

At this time there is no resolution to your counseling request. You have two options available to you. You can do nothing, at which point your inquiry will expire and no further action will be taken on your counseling request, or you can elect to file a formal complaint.

If you opt to file a formal complaint, you have 15 days from the date of receipt of this letter to file a timely formal complaint. Your complaint could be subject to dismissal in accordance with 29 CFR Part 1614.107 if not filed within the 15-day time limit. Your complaint will be deemed timely if it is postmarked before the expiration of the 15-day time limit. The Complaint must be specific and contain only those issues either specifically discussed with me or issues that are like or related to the issues that you discussed with me.

Enclosed are the required forms if you wish to pursue your complaint further through the EEO process. If you choose to file a formal complaint, you must complete, sign, and date PS Form 2579, PS Form 2565 and return them to the following address:

**NEEOISO-Formal Complaint**  
**U.S. Postal Service**  
**PO Box 21979, Tampa, FL**  
**Tampa, FL 33622-1979**

You are not permitted to use a penalty envelope to submit your formal complaint. You

PO Box 5023  
MILWAUKEE, WI 53201-5023  
TEL: 414-287-1838  
FAX: 414-287-1899

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will receive written acknowledgment of your formal complaint.

As a reminder, it is your responsibility to immediately notify NEEOISO, U. S. Postal Service, PO Box 21979, Tampa, FL 33622-1979, of any changes to your mailing address. If you designate or change your EEO representative, it is your responsibility to advise NEEOISO, in writing, of that person's name, title, mailing address, and phone number.

If you have any questions, please do not hesitate to give me a call at 414-287-1838.

Randy Dillon

Randy Dillon  
EEO ADR Specialist

Enclosures: PS Forms 2579-A & 2565

## CERTIFICATE OF SERVICE

I certify that on this date PS Form 2579-A, Notice of Right to File Individual Complaint, with attachments, was mailed to the following at the mailing address[es] listed below:

Henrietta Arnold-Simpson  
3427 W. Villard Ave  
Milwaukee, WI 53209

Priority Mail Signature Confirmation No.: 9410803699300140041514



Randy Dillon

8/11/2021

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EEO ADR Specialist  
EEO Field Operations-Region 2  
PO Box 5023  
Milwaukee, WI 53201-5023

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Date



**EEO Complaint of Discrimination in the Postal Service**  
(See Instructions and Privacy Act Statement on Reverse)

|   |  |   |
|---|--|---|
| 1. Name   | 2. SSN or EIN  | 3. Case No.<br>4J-530-0115-21   |
| 4a. Mailing Address (Street or P.O. Box)  | 4b. City, State and ZIP+4®   |   |
|   | 6. Home Phone<br>(      )  | 7. Work Phone<br>(      )   |
| 8. Position Title (USPS Employees Only)   | 9. Grade Level (USPS Employees Only)   | 10. Do You Have Veteran's Preference Eligibility?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 11. Installation Where You Believe Discrimination Occurred<br>(Identify Installation, City, State, and ZIP+4) | 12. Name & Title of Person(s) Who Took the Action(s) You Allege Was Discriminatory |   |
| 13a. Name of Your Designated Representative   | 13b. Title   |   |
| 13c. Mailing Address (Street or P.O. Box)   | 13d. City, State and ZIP+4   |   |
| 13e. Email Address *  | 13f. Home Phone<br>(      )  | 13g. Work Phone<br>(      )   |

\* Providing this information will authorize the Postal Service™ to send important documents electronically.

|  |   |
|--|---|
| 14. Type of Discrimination You Are Alleging  | 15. Date on Which Alleged Act(s) of Discrimination Took Place   |
| <input type="checkbox"/> Race (Specify):<br><input type="checkbox"/> Color (Specify):<br><input type="checkbox"/> Religion (Specify):<br><input type="checkbox"/> National Origin (Specify): | <input type="checkbox"/> Sex (Specify):<br><input type="checkbox"/> Age (40+) (Specify Date of Birth):<br><input type="checkbox"/> Retaliation (Specify Protected EEO Activity):<br><input type="checkbox"/> Disability (Specify):<br><input type="checkbox"/> Genetic Information (Specify): |

16. Explain the specific action(s) or situation(s) that resulted in you alleging that you believe you were discriminated against (treated differently than other employees or applicants) because of your race, color, religion, sex, age (40+), national origin, genetic information, disability, or retaliation for participation in a protected EEO activity. *Note that if your allegation is like or related to a previous complaint, that complaint may be amended.*  
29 C.F.R. § 1614.106(d).

17. What Remedy Are You Seeking to Resolve this Complaint?

18. Did You Discuss Your Complaint with a Dispute Resolution Specialist or a REDRESS Mediator?

Yes (Date you received the Notice of Final Interview): \_\_\_\_\_

No

|  |                            |
|--|----------------------------|
| 19a. Signature of Dispute Resolution Specialist<br><i>Randy Dillon</i> | 19b. Date<br>8/11/2021     |
| 20. Signature of Complainant or Complainant's Attorney                 | 21. Date of this Complaint |

**Privacy Act Statement**

**Privacy Act Statement:** Your information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. Collection is authorized by 39 U.S.C. 401, 409, 410, 1001, 1005, and 1206. Providing the information is voluntary, but if not provided, we may not be able to process your request. We may disclose your information as follows: in relevant legal proceedings; to law enforcement when the U.S. Postal Service® (USPS®) or requesting agency becomes aware of a violation of law; to a congressional office at your request; to entities or individuals under contract with USPS; to entities authorized to perform audits; to labor organizations as required by law; to federal, state, local or foreign government agencies regarding personnel matters; to the Equal Employment Opportunity Commission; and to the Merit Systems Protection Board or Office of Special Counsel. For more information regarding our privacy policies, visit [www.usps.com/privacypolicy](http://www.usps.com/privacypolicy).

**Instructions**

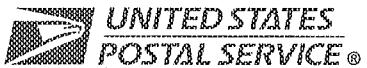
- A. Use this form to file a formal complaint if you are an employee or applicant who believes that you have been discriminated against by the Postal Service because of your race, color, religion, sex, age (40+), national origin, genetic information, disability, or retaliation for participation in a protected EEO activity. You must have presented the matter to an EEO dispute resolution specialist within 45 calendar days of the date the incident occurred or, if a personnel action is involved, within 45 calendar days of the effective date of the personnel action. Mail the completed formal complaint to the following address:

NEEOISO – Formal Complaints  
U.S. Postal Service  
P.O. BOX 21979  
Tampa FL 33622-1979

- B. Unless you have agreed to extend the 30-day period for an additional 60 calendar days, you will receive a notice of right to file a formal complaint within 30 calendar days from the date of your first contact with the EEO Office. You must file your formal complaint within 15 calendar days of the date on which you receive your notice of right to file. If you do not receive a notice of right to file within the appropriate time period, you may file a formal complaint at any time thereafter, up to 15 calendar days after receiving the notice.
- C. If you have agreed to participate in alternate dispute resolution (ADR), the informal process must be completed within 90 calendar days of your first contact with the EEO office. You have a right to file a formal complaint at any time thereafter, up to 15 calendar days after you have received your notice of right to file.
- D. Your notice of right to file contains the address where your formal complaint must be mailed or delivered and the address is listed in Part A of this document. The formal complaint will be deemed timely if it is received or postmarked before the expiration of the 15-day filing period, or, in the absence of a legible postmark, if it is received by mail within 5 days of the expiration of the filing period.
- E. The time limits for filing a formal complaint may be extended if you show that you were prevented by circumstances beyond your control from timely submitting the complaint, or if you present other reasons considered sufficient by the Postal Service.
- F. If you need help in preparing this form, you may obtain assistance from a representative of your choice. You may also seek guidance from the dispute resolution specialist who issued you the notice of right to file.
- G. Your formal complaint must be in writing and must be signed and dated by you or your attorney. You are entitled to a representative of your choice at all stages of the EEO complaint process; however, only an attorney can sign official EEO documents on your behalf.
- H. If your written complaint is accepted, it will be assigned to an EEO complaints investigator who will provide you with an opportunity to present all facts that you believe resulted in the alleged discrimination. The EEO complaints investigator will conduct a thorough review of the circumstances under which the alleged discrimination occurred.
- I. While your complaint is under investigation, you may amend it to add claims that are like or related. Contact the EEO office for the address where your written amendment request must be mailed or delivered.
- J. You or your representative will each be provided a copy of the completed investigative file. You have the right to request a hearing within 30 calendar days of the date you receive the investigative

file by mailing or delivering your request to the appropriate Equal Employment Opportunity Commission (EEOC) District Office with a copy to the area Manager, EEO Compliance & Appeals. If you are represented by an attorney, the 30-day period will begin on the date your attorney receives a copy of the case file. Instead of requesting a hearing, you may request an agency decision without a hearing and the head of the agency or his/her designee will issue you a decision letter with appeal rights.

- K. If you request a hearing, the EEOC will appoint an administrative judge (AJ) to conduct a hearing. The AJ will notify you and the Postal Service of the right to seek discovery prior to the hearing to develop evidence reasonably on matters relevant to the issues raised in the complaint(s) to be heard. Attendance at the hearing will be limited to persons the AJ determines have direct knowledge relating to the complaint. Hearings are part of the investigative process and are closed to the public.
- L. Following the hearing, the AJ will send you and the agency a copy of the hearing record, including the transcript and his/her decision. The head of the agency, or his/her designee, will review the entire record, including the transcript, and will determine whether or not to implement the AJ's decision. You will receive the agency's notification of final action within 40 days of the date the agency receives the AJ's decision. If the agency's final action will not fully implement the AJ's decision, the agency must appeal to the EEOC. A copy of the Postal Service's appeal will be attached to your notification of final action.
- M. If you are not satisfied with the decision of the AJ, or the agency's final action on the decision, you have the right to appeal within 30 calendar days after receiving notification of the agency's final action. Your appeal must be mailed to the EEOC at the following address:
- EEOC Office of Federal Operations  
Federal Sector Programs  
P.O. Box 77960  
Washington DC 20013-3960
- N. In lieu of filing an appeal of the agency's final action to the EEOC's Office of Federal Operations (OFO), you may file a civil action in an appropriate U.S. District Court within 90 calendar days of your receipt of the agency's final action.
- O. You may also file a civil action in an appropriate U.S. district court; after 180 calendar days have passed from the date you filed the complaint, if the final agency action has not been issued and an appeal has not been filed; within 90 days of receipt of the OFO's decision on your appeal; or after 180 days have passed from the date you filed your appeal with the OFO, if there has been no decision issued on that appeal.
- P. Special provisions exist for age discrimination. The Law sets forth the right to bypass the administrative complaint processing procedure and file a civil action. For additional information, contact the EEO office.
- Q. Under the Equal Pay Act, you have the right to file a civil action without exhausting the administrative procedures.
- R. You must keep the EEO complaint processing office aware of your current mailing address at all times. Failure to notify NEEOISO-EEO Contact Center and the EEOC of an address change could result in the dismissal of your complaint.



## Notice of Right to File Individual Complaint

To: Name (First, MI, Last)

Henrietta Arnold-Simpson

Case Number

4J-530-0115-21

8/11/2021

This notice will attest to the fact that on \_\_\_\_\_, I advised you of the actions taken concerning the alleged discrimination that you brought to my attention. If the matters that you raised during the pre-complaint processing stage have not been resolved, you have the right to file a formal complaint within 15 calendar days of the date you receive this notice. If you decide to file a formal complaint, your complaint must be put in writing and signed by you or your attorney, if you retained one to represent you. I am providing you with PS Form 2565, *EEO Complaint of Discrimination in the Postal Service*, for this purpose. Your complaint must be mailed or delivered to:

NEEOISO — Formal Complaints  
U.S. POSTAL SERVICE  
P.O. BOX 21979  
TAMPA, FL 33622-1979

Your complaint will be deemed timely filed if it is received at this address before the expiration of the 15-day filing period, or if it bears a postmark that is dated before the expiration of the filing period. In the absence of a legible postmark, it must be received by mail within 5 calendar days of the expiration of the filing period.

An EEO discrimination complaint can be processed only if the complainant alleges he or she has been discriminated against on the basis of race, color, religion, sex (male, female), sex (LGBT), national origin, age (40+), disability, genetic information, or retaliation for participation in protected EEO activity. In addition, courts have ruled the complainant has the burden of presenting evidence which would give rise to an inference of discrimination. A complaint must contain the following information:

(1) Your name, address, position, and level;

■ If you change your address, you have a regulatory requirement to immediately report the change to the address below: NEEOISO-EEO Contact Center, U.S. Postal Service, P.O. Box 21979, Tampa, FL 33622-1979

(2) The specific action or matter complained of, the date of occurrence, and the names of the official(s) who took the alleged discriminatory action at issue in this complaint;

(3) The specific type of discrimination alleged, (e.g., race - African American, sex - female);

■ If you allege age discrimination, you must have been at least 40 years of age on the date the alleged discriminatory action occurred.

(4) A brief statement of the facts that led you to believe you were discriminated against and the names of similarly situated individuals whom you believe were treated differently than you.

■ If you allege a failure to accommodate a disability or your religion, you must explain the accommodation sought and why you sought it.

■ If you allege retaliation, you must show a connection between the action about which you are complaining and your participation in protected EEO activity. You also must show when the alleged discriminatory action at issue in this complaint occurred, the management official who took the action was aware that you had previously engaged in protected EEO activity.

(5) The name of the EEO Alternative Dispute Resolution Specialist who provided you with this notice and the date you received this Notice of Right to File.

**Privacy Act Statement and Rehabilitation Act Notice**

**Privacy Act Statement:** Your information will be used to adjudicate complaints of alleged discrimination and to evaluate the effectiveness of the EEO program. Collection is authorized by 39 U.S.C. 401, 409, 410, 1001, 1005, and 1206. Providing the information is voluntary, but if not provided, we may not be able to process your request. We may disclose your information as follows: in relevant legal proceedings; to law enforcement when the U.S. Postal Service® (USPS®) or requesting agency becomes aware of a violation of law; to a congressional office at your request; to entities or individuals under contract with USPS; to entities authorized to perform audits; to labor organizations as required by law; to federal, state, local or foreign government agencies regarding personnel matters; to the Equal Employment Opportunity Commission; and to the Merit Systems Protection Board or Office of Special Counsel. For more information regarding our privacy policies, visit [www.usps.com/privacypolicy](http://www.usps.com/privacypolicy).

**Rehabilitation Act Notice:** Under the Rehabilitation Act, medical information is confidential and may only be requested or disclosed in very limited circumstances. Medical documentation about the complainant's and possible comparators' employees' medical conditions and work restrictions may be requested in connection with the investigation of an EEO complaint. Information about medical restrictions (but not medical conditions) obtained in the course of an EEO investigation may be disclosed to supervisors and managers who need to know about restrictions on the work or duties of the employee and about necessary accommodations. Supervisors and managers are not permitted to share such information with peers or subordinates or to discuss the information with those who have no need to know and whose requests for the information are not job-related and consistent with business necessity.

Signature of EEO Alternative Dispute Resolution Specialist

Date Issued

8/11/2021

Your Signature

Date Received

**Alternative Dispute Resolution Specialist:** If you are mailing this notice, you must send it by Priority Mail®, Signature Confirmation™ delivery.